

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit : 3765
 Examiner : Katherine M. Moran
 Applicant : Perry R. DeYoung
 Appln. No. : 10/763,720
 Filing Date : January 23, 2004
 Confirmation No. : 7339
 For : FOOD HOLDER

Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450

Dear Sir:

Enclosed is a response to the Office Action dated March 15, 2006. The items checked below are appropriate:

X Applicants hereby petition for a one month extension of time to respond to the above Office Action. A fee of \$60.00 for the Extension is due.

Any fee for additional claims has been calculated as shown below:

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total Claims	*9	Minus	**20	=0	x \$25	\$0	X \$ 50	\$
Independent Claims	*3	Minus	***3	=0	x 100	\$0	X \$200	\$
First Presentation of Multiple Dependent Claims \$180						\$0	X \$360	\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0		\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

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*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
 The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

Each Additional Group of 50 Pages That Exceeds 100 Pages

Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity	
No. of Groups Remaining After Amendment		Highest No. of Groups Previously Paid For	Present Extra Groups	Rate (each add'l 50 pages over 100)	Add'l Fee	Rate (each add'l 50 pages over 100)	Add'l Fee
	Minus	*	=**	x \$125	\$	X \$250	\$

One "group" is a set of 50 application (specification, claims, abstract and drawings) pages.

* If the entry in Col. 2 is more than the entry of Col. 1, write "0" in Col. 3

** If the entry in Col. 3 is not "0," pay the required fee.

___ Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.

___ No additional fee is required.

___ A fee of _____ to cover the utility application size fee is enclosed.

___ A fee of _____ to cover the cost of the additional claims added by this response is enclosed.

X A fee of \$60.00 to cover Petition for Extension of Time is due.

___ A check in the amounts of _____ is enclosed to cover the above fees.

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X Please charge the required fees or any additional fees to Deposit Account 16 2463. A duplicate copy of this sheet is attached.

Respectfully submitted,

July 17, 2006

/Marcus P. Dolce/

Date

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MPD/msj